SERIAL NUMBER : 10/520737

TO: PCT OFFICE OF FINANCE
     CRYSTAL PLAZA 2 - 5TH FLOOR

FROM : PCT INTERNATIONAL DIVISION - DO/EO
        CRYSTAL PLAZA 2 - 8TH FLOOR

PLEASE PROCESS THE FOLLOWING CORRECTIONS :

FROM		TO	
CODE	FEE	CODE	FEE
1632	500	1632	400

OTHER :

☑ CHARGE VOUCHER IS ATTACHED TO CHARGE / REFUND
ADDITIONAL FEES

☐ OTHER : _____

THE ORIGINAL METHOD OF PAYMENT WAS :

☐ BY A CHECK

☑ BY A CHARGE TO DEPOSIT ACCOUNT NO. 20 - 0778

PATENT APPLICATION FEE DETERMINATION RECORD
Effective December 8, 2004

Application or Docket Number: /520737

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)	SMALL ENTITY TYPE ☐		OR	OTHER THAN SMALL ENTITY	
			RATE	FEE		RATE	FEE
U.S. NATIONAL STAGE FEES							
BASIC FEE	SMALL ENT. = $ 150	LARGE ENT. = $ 300	BASIC FEE		OR	BASIC FEE	300
EXAMINATION FEE	Satisfies PCT Article 33(1)-(4) = $ 50 / $ 100	All other situations = $ 100 / $ 200	EXAM. FEE			EXAM. FEE	200
SEARCH FEE	U.S. is ISA = $ 50 / $ 100 ALL other countries = $ 200 / $ 400	All other situations = $ 250 / $ 500	SEARCH FEE			SEARCH FEE	400
FEE FOR EXTRA SPEC. PGS.	minus 100 =	/ 50 =	X $ 125 =			X $ 250 =	
TOTAL CHARGEABLE CLAIMS	23 minus 20 =	* 3	X $ 25 =		OR	X $ 50 =	150
INDEPENDENT CLAIMS	1 minus 3 =	*	X $ 100 =		OR	X $ 200 =	
MULTIPLE DEPENDENT CLAIM PRESENT		☑	+ $ 180 =		OR	+ $ 360 =	360
* If the difference in column 1 is less than zero, enter "0" in column 2			TOTAL		OR	TOTAL	1410

CLAIMS AS AMENDED - PART II

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	SMALL ENTITY RATE	ADDI-TIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDI-TIONAL FEE
Total	*	Minus	**	=	X $ 25 =		OR	X $ 50 =	
Independent	*	Minus	***	=	X $ 100 =		OR	X $ 200 =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐					+ $ 180 =		OR	+ $ 360 =	
					TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE	ADDI-TIONAL FEE	OR	RATE	ADDI-TIONAL FEE
Total	*	Minus	**	=	X $ 25 =		OR	X $ 50 =	
Independent	*	Minus	***	=	X $ 100 =		OR	X $ 200 =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐					+ $ 180 =		OR	+ $ 360 =	
					TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FORM PTO-875 (Rev. 02/2005)   Patent and Trademark Office - U.S. DEPARTMENT OF COMMERCE